

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>	<i>109861</i>	<i>1/10</i>
O.I.P.E. CLASSIFIER			<i>5-1-24700</i>
FORMALITY REVIEW	<i>SA</i>	<i>13300</i>	<i>2/8/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1 ✓	<i>3/12/02</i>
2 ✓	<i>1/15/03</i>
3 ✓	<i>3/12/03</i>
4 ✓	
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49 ✓ =	
50 ✓ =	

Claim	Date
Final	
Original	
51 ✓ -	<i>2/15/03</i>
52 ✓ -	
53 ✓ -	
54 ✓ -	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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